# STATE OF NEW HAMPSHIRE

# 2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

# RECEIVED

PLEASE PRINT

JUL 23 2018

1. Name of Lobbyist	(s) Glenn Bra	ckett, Ju	dy Stadtman		<u></u>	NEW HAMPSHIRE
11. Name of lobbyist	's partnership,	firm or c	orporation, if a	ny:		
New Hampshire	AFL-CIO					
(Na	me of partnership.	firm or co	rporation)	<u> </u>	411.	
161 Londonderry	Turnpike, Hool	ksett, NH	03106			
Business Address: (S	treet)		(Town/City)		(State)	(Zip Code)
( ) 603-623-73	02	( )	603-623-73	.04 e-r	nail presid	ent@nhaflcio.org
(Telephone)		_ ` ′	(Fax			
III. This statement of reportable expense to All reportable train	ransactions wh	ich are n	ot attributable	to any one clie	nt).	may file a separate report for the following client:
New Hampshire		-	·			· ·
- rew riampanire		Client as it	appears on the Lo	bbyist Registrati	on Form)	
<u>OR</u>					·	
☐ All reportable tran unrelated to any parti		lobbyist (i	ncluding the lob	byist's family),	or the lobbyi	ng firm listed below which are
IV. Date of Report	April 25, 20	18 🗌		July 2	5, 2018 🖄	
Reports cover: acti	vity from date of i		1 to 3/31/18		4/1/18 to 6/30/	
	October 31, activity from 7/1		/18		ry 30, 2019 [ 10/1/18 to 12/	
V. There have bee If this box is checked, Concord, NH 03301.						the last report.   State House, Room 204,
VI. Check if addition	nal reports are	attached:				
X If you have received	•			file Addendum	A- Fees and	Expenses
☐ If you have paid a Expense Reimbursem		r reimbur:	sed expenses, yo	ou must file Ade	dendum B– F	Report of Honorariums or
☐ If you, your firm,	or your family	has made	political contrib	utions, you mus	st file Addeno	dum C- Political Contributions
Sworn Statement/Af I have read RSA 15, I and complete to the b	RSA 15-B, RSA	14-C and		ereby swear or	affirm that th	e foregoing information is true
Le de	white			July 2	20, 2018	
(Signature of lobbyis	st)		<del></del>			Date)
GLENN E	BRACKET	T				
(Print Name of lobby		<del></del>	<del></del>			



### STATE OF NEW HAMPSHIRE

## 2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

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**NEW HAMPSHIRE** 

PLEASE PRINT JUL 23 2018

I. Name of Lobbyist(s)	Glenn Bracke	ett, Jud	y Stadtman			NEW HAMPSHIRE DEPARTMENT OF STA
II. Name of lobbyist's	partnership, firm	n or co	rporation, if an	y:		<u> </u>
New Hampshire Al	FL-CIO					
(Name	e of partnership, firr	n or corp	ooration)	· · · · · · · · · · · · · · · · · · ·		
161 Londonderry Ti	urnpike, Hookse	tt, NH (	03106			
Business Address: (Stre	eet)		(Town/City)	(S	tate)	(Zip Code)
( ) 603-623-7302 (Telephone)	2 (	)_	603-623-7304 (Fax)	4 e-mail	president	@nhaflcio.org
reportable expense tra	ansactions which	are not	t attributable to	any one client).		file a separate report for
All reportable trans		in the n	nonths prior to th	e reporting date re	elative to the	following client:
New Hampshire A		nt oc it o	nnuare on the Lab	byist Registration Fe		
OR	(run Name of Che.	masma	ppears on the Loo	byist Registration re	orm)	
·	ections by the lobb lar client.	yist (in	cluding the lobb	yist's family), or t	he lobbying	firm listed below which are
IV. Date of Report Reports cover: activity	April 25, 2018 [		10 3/31/18	July 25, 20 activity from 4/1/1		
а	October 31, 201 activity from 7/1/18		18	January 30 activity from 10/1	•	8
V. There have been If this box is checked, coconcord, NH 03301.						
VI. Check if additiona	l reports are atta	iched:	-			
☑ If you have receive	•		res, you must file	e Addendum A-	Fees and Exp	penses
☐ If you have paid an Expense Reimbursemer		imburse	ed expenses, you	must file Addend	lum B- Rep	ort of Honorariums or
☐ If you, your firm, o	r your family has	made p	olitical contribut	ions, you must file	Addendun	C- Political Contributions
Sworn Statement/Affii I have read RSA 15, RS and complete to the bes	SA 15-B, RSA 14-	C and F		eby swear or affir	m that the fo	regoing information is true
(Signature of lobbyist)	stad <del>1</del>	<del>-</del>	_	July 20, 2	018 (Date	<u> </u>
Judy Stadt (Print Name of lobbyis	MWV		_			

# P L E A S E P R I N

1.

# STATE OF NEW HAMPSHIRE

#### Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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JUL 2 3 2018

c) \$ \_\_\_\_\_

Name of Lobbyist(s) _	Glenn Brackett, Judy Stadtman	NEW HAMPSHIRE -DEPARTMENT-OF STATE
Name of lobbyist's p	partnership, firm or corporation, if any:	 DEFARMENT-OF STATE

New Hampshire AFL-CIO	ership, firm or corporation)	<del></del>	
III. Name of Client New	Hampshire AFL-CIO	Date	July 20, 2018
to lobbying, including fees fo	Ill fees received from the client identified abors services such as public advocacy, governming legislation, and related legal work. The	ent relations,	or public relations servi
a) Total of all fees received in	this reporting period	a) \$	3,026.85
	his calendar year, prior to this reporting perional of all prior monthly reports for this calendate	od b) \$ ar year)	3,026.85
c) Total of all fees received to (Add lines a and b)	o date	c) \$	6,053.70
d) Indicate the amount of any yet been paid	such fees that are due, but have not	d) \$	
fees. Separate reports are to the lobbyist(s)/firm that are used Expenses are to be reported in during the reporting period for individual expenses where the lunch where the cost was \$25, being lobbied, purchase of a con- tice of an itemized statement of earny purpose not covered by the correstaurant expenses for a legi-	ships, firms, or corporations are required to be filed for expenditures made relative to eau anrelated to any one client a separate repoin one of three categories of expenses: (a) or salaries, benefits, support staff, and office expenditure was of \$25.00 or less (for exaultoness, purchase of a pen with a value of eremonial object given to a person being lotted individual expenditure made during this refail (a) (for example: purchase of a meal with to the subject of lobbying with a value grislative reception). Expenses for honorarius on separate addendums and should not be reported.	ch client and of may be fil the aggregate expenses; (I mple: meals pf less than \$10 bied with a veporting periovalue of greate eater than \$20 ms, expense	if expenditures are made ed for the lobbyist(s)/fi e total of all expenses p b) the aggregate total of ourchased during a busin 0 that is given to the per value of \$25.00 or less); od of greater than \$25.00 ter than \$25, purchase of 5, but not greater than \$ reimbursement, or polit
	or this reporting period for salaries, benefits, ses, related directly or indirectly to lobbying.	. a) \$	3,026.85
o) Total aggregate of expendi	tures during this reporting period, not report	ed b) \$	

c) Total of all itemized expenditures reported in detail in section VI.

d) Total expenses for this reporting period	d) \$
(Add lines a, b and c)	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$3,026.85
f) Total of all expenses year to date	f) \$6,053.70
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from I period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
Le Britist	July 20, 2018
(Signature of lobbyist)	(Date)
Glenn Brackett	
(Print Name of lobbyist)	